Focus on Commonly Prescribed Medications: Use and Consequences

U Opiods U

- Oxycodone (OxyContin)
- Propoxyphene (Darvon)
- Hydrocodone (Vicodin)
- Hydromorphone (Dilaudid)
- Meperidine (Demerol)
- Piphenoxylate (Lomotil)

Generally prescribed for:

- Postsurgical pain relief
- Management of acute or chronic pain
- Relief of coughs and diarrhea

In the body:

Opioids attach to opioid receptors in the brain and spinal cord, blocking the transmission of pain messages to the brain.

Effects of short-term use:

- Blocked pain messages
- Drowsiness
- Constipation
- Depressed respiration (depending on dose).

Effects of long-term use:

Potential for tolerance, physical dependence, withdrawal, and/or addiction.

Possible negative effects:

Severe respiratory depression or death following a large single dose.

Should not be used with:

Other substances that cause CNS depression, including:

- Alcohol
- Antihistamines
- Barbiturates
- Benzodiazepines
- General anesthetics

U CNS Depressants **U**

- Barbiturates
- Mephobarbital (Mebaral)
- Pentobarbital sodium (Nembutal)
- Benzodiazepines
- Diazepam (Valium)
- Chlordiazepoxide hydrochloride (Librium)
- Alprazolam (Xanax)
- Triazolam (Halcion)
- Estazolam (ProSom)

Generally prescribed for:

- Anxiety
- Tension
- Panic attacks
- Acute stress reactions
- Sleep disorders
- Anesthesia (at high doses)

In the body:

CNS depressants slow brain activity through actions on the GABA system and, therefore, produce a calming effect.

Effects of short-term use:

A "sleepy" and uncoordinated feeling during the first few days, as the body becomes accustomed—tolerant—to the effects, these feelings diminish.

Effects of long-term use:

Potential for tolerance, physical dependence, withdrawal, and/or addiction

Possible negative effects:

Seizures following a rebound in brain activity after reducing or discontinuing use.

Should not be used with:

Other substances that cause CNS depression, including:

- Alcohol
- Prescription opioid pain medicines
- Some over-the-counter cold and allergy medications

U Stimulants **U**

- Dextroamphetamine (Dexedrine)
- Methylphenidate (Ritalin)
- Sibutramine hydrochloride monohydrate (Meridia)

Generally prescribed for:

- Narcolepsy
- Attention-deficit hyperactivity disorder (ADHD)
- Depression that does not respond to other treatment
- Short-term treatment of obesity
- Asthma

In the body:

Stimulants enhance brain activity, causing an increase in alertness, attention, and energy.

Effects of short-term use:

- Elevated blood pressure
- Increased heart rate
- Increased respiration
- Suppressed appetite
- Sleep deprivation

Effects of long-term use:

Potential for addiction.

Possible negative effects:

- Dangerously high body temperatures or an irregular heartbeat after taking high doses
- Cardiovascular failure or lethal seizures
- For some stimulants, hostility or feelings of paranoia after taking high doses repeatedly over a short period of time

Should not be used with:

- Over-the-counter cold medicines containing decongestants
- Antidepressants, unless supervised by a physician
- Some asthma medications